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Complete if Known Substitute for form 1449A/PTO 10/037,593 **Application Number** FORMATION DISCLOSURE October 19, 2001 Filing Date ATEMENT BY APPLICANT Matthew P. Kulig First Named Inventor 2157 Art Unit Barbara N. Burgess (use as many sheets as necessary) **Examiner Name** 60022210-0157 of 6 **Attorney Docket Number**

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Examiner Initials*	Cite No.1	Document Number Number-Kind Code ^{2 (if known)} Publication Date MM-DD-YYYY Applicant of Cited Document		Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	
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					Art Unit	Art Unit		2157			
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			Group Art Unit	2157						
		(use as many sheets as necessary)	Examiner Name	Barbara N. Burgess						
Sheet		3 of 6	Attorney Docket No. 60022210-0157							
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